

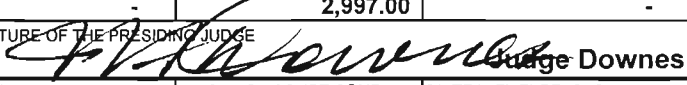
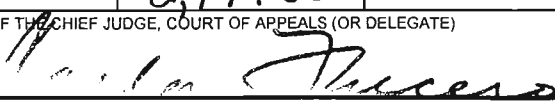


1. CIR./DIST./DIV. CODE WYX		2. PERSON REPRESENTED Kellogg, Dale		VOUCHER NUMBER 110222000105	
3. MAG. DKT./DEF. NUMBER 10-MJ-053-D		4. DIST. DKT./DEF. NUMBER		5. APPEALS DKT./DEF. NUMBER	
7. IN CASE/MATTER OF (Case Name) USA vs. Dale Kellogg		8. PAYMENT CATEGORY Appeal		9. TYPE PERSON REPRESENTED Adult Defendant	
				10. REPRESENTATION TYPE CC Criminal case	
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list (up to five) major offenses charged, according to severity of offense. 18:13-9999.P (Petty Offense Violations)					
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix), AND MAILING ADDRESS: Name: James Whiting Address: Whiting Law P.C. 315 Main St. Suite 10 Lander, WY, 82520 Phone #: (307) 332-5534 Fax #: (307) 332-5562		13. COURT ORDER: Prior Attorney's Name _____ Appointment Dates _____ <input type="checkbox"/> Because the above-named person represented has testified under oath or has otherwise satisfied this Court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 12 is appointed to represent this person in his case, OR <input type="checkbox"/> Other (See Instructions) Signature of presiding Judicial Officer or By Order of the Court  12/30/09 _____ Date of Order Nunc Pro Tunc Date			
14. NAME AND ADDRESS OF LAW FIRM (Only provide per instructions) Name: _____ Address: _____					
Repayment or partial repayment ordered from the person represented for this service at time of appointment. <input type="checkbox"/> Yes <input type="checkbox"/> No					
CLAIM FOR SERVICES AND EXPENSES			FOR COURT USE ONLY		
Categories (Attach itemization of services w/ dates)		HOURS CLAIMED	TOTAL AMOUNT CLAIMED	Math/Tech. Adjusted Hrs	Math/Tech. Adjusted Amounts
In Court	a. Arraignment and/or Plea	-	-	-	-
	b. Bail and Detention Hearings	-	-	-	-
	c. Motion Hearings	-	-	-	-
	d. Trial	-	-	-	-
	e. Sentencing Hearings	-	-	-	-
	f. Revocation Hearings	-	-	-	-
	g. Appeals Court	-	-	-	-
	h. Other (Specify on add'l sheets)	-	-	-	-
TOTALS		-	-	-	-
Out of Court	a. Interviews and Conferences	7.3	909.50	-	909.50
	b. Obtaining and reviewing records	-	-	-	-
	c. Legal Research and brief writing	15.1	1,887.50	-	1,887.50
	d. Travel time	-	-	-	-
	e. Investigative & other work (Specify)	1.6	200.00	-	200.00
TOTALS		24.0	2,997.00	-	2,997.00
17. Travel Expenses (lodging, parking, meals, mileage, etc.)			-	-	-
18. Other Expenses (other than expert, transcripts, etc.)			10.51	-	10.51
GRAND TOTALS (CLAIMED AND ADJUSTED):			3,007.51	-	3,007.51
19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE From: 12/30/2009 to: 1/12/2011			20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION: 1/12/11		21. CASE DISPOSITION Ongoing-Counsel w/prev
22. CLAIM STATUS: <input checked="" type="radio"/> Final Payment <input type="radio"/> Interim Payment Number <input type="radio"/> Supplemental Payment (Payment #)					
Have you previously applied to the court for compensation and/or reimbursement for this case? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, were you paid? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Other than from the court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this representation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, give details on additional sheets.					
I swear or affirm the truth or correctness of the above statements. Signature of Attorney  Date 19 Jan 2011					
APPROVED FOR PAYMENT - COURT USE ONLY					
23. IN COURT COMP.	24. OUT OF COURT COMP.	25. TRAVEL EXPENSES	26. OTHER EXPENSES	27. TOTAL AMT. APPR. - Check if Certified <input type="checkbox"/>	
	2,997.00	-	10.51	3,007.51	
28. SIGNATURE OF THE PRESIDING JUDGE  Judge Downes			DATE 2/2/11	28a. JUDGE CODE 8905	
29. IN COURT COMP.	30. OUT OF COURT COMP.	31. TRAVEL EXPENSES	32. OTHER EXPENSES	33. TOTAL AMT. APPR./CERT.	
-	2,997.00	-	10.51	3,007.51	
34. SIGNATURE OF THE CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) 			DATE 2/8/11	34a. JUDGE CODE - 018	